Landscape of Plan
Options in

Arizona



Medicare Advantage Cost Plans and Demonstrations

1-800-MEDICARE TTY 1-877-486-2048 www.medicare.gov







Medicare Advantage, Cost Plans, and Demonstrations Landscape

What is the Landscape of Local Plans?

The Landscape of Local Plans lists all plans available in your area, providing important information on:

- Cost (premiums, deductibles and payments)
- Coverage (important issues around what and how drugs are covered)
- Convenience (pharmacy and mail-order options)

How to read the Medicare Advantage, Cost Plans, and Demonstrations Landscape

Medicare Advantage Plans (like an HMO or PPO), Cost Plans, and Demonstrations allow you to get your health care, including prescription drug coverage at a significantly lower cost through a network of doctors, hospitals, and pharmacies. To help you better understand this information, read on for a description of each column in the Landscape. **Please note**, a dash in the "Drug Premium" column means that plan does not offer prescription drug coverage.

DESCRIPTION

County: The county where the plan is available. To find a plan for you, start by finding your county.

Organization Name: The name of the company offering the Medicare drug plan. Some organizations offer more than one Medicare drug plan.

Plan Name: The name of the Medicare Advantage or other Medicare Health Plan.

Type of Medicare Health Plan

HMO: A type of health plan in which you generally must see doctors and hospitals on the plan's list (network) except in an emergency. You also need a referral to see a specialist.

Local PPO or Regional PPO: A type of health plan in which you pay less if you use doctors and hospitals on the plan's list (network). You can go to any doctor or hospital not on the plan's list, but it will usually cost more. You do not need a referral to see a specialist. A regional PPO has a larger service area than a local PPO.

Private Fee-for-Service: A type of health plan in which you can go to any doctor or hospital that accepts the terms of the plan's payment. You do not need a referral to see a specialist.

Cost Plan: A type of health plan in which you can use doctors and hospitals on the plan's list (network). However, unlike Medicare Advantage Plans, if you get services from a non-network provider, they are covered under the Original Medicare Plan. Coverage in Medicare Cost Plans can include prescription drug coverage. These plans don't provide free additional benefits or savings on your Medicare Part B or prescription drug coverage premiums. There are a limited number of Medicare Cost Plans. Some Medicare Cost Plans cannot accept new enrollment, please check with the plan for enrollment availability.

Demo Plan: These plans are special projects that test possible future improvements in Medicare coverage, costs, and quality of care.

Cost

Total Premium: The total amount you would pay the plan each month for your health care and prescription drug coverage.

Drug Premium: The amount of the total premium that goes toward the drug coverage portion of the Medicare Advantage or other Medicare Health Plan. This is not an additional amount you pay. A dash in the "Drug Premium" column means that plan does not offer prescription drug coverage.

Drug Deductible: The amount you pay before the drug plan begins to pay.

COVERAGE

Offers Variable Copayments (tiers): In plans that offer variable copayments, you will pay a fixed amount for each drug and this fixed amount may be different depending on the type of drug. For example, you may pay a lower copayment for generic medications compared to brand medications because generic medications may be on a lower formulary level (tier) than brand medications.

Type of Extra Coverage Offered in the Gap: All plans offer coverage until you hit a limit of \$2,250 in total drug costs. And all plans offer coverage when your out-of-pocket costs exceed \$3,600. Some plans offer coverage during the gap between \$2,250 in total costs and \$3,600 in out-of-pocket costs.

Generics Only: Plan covers generic drugs in coverage gap.

Generics and Brands: Plan covers generic and brand drugs in coverage gap.

Number of Top 100 Drugs on Formulary: How many of the most commonly used 100 drugs by people with Medicare the plan covers.

CONVENIENCE

Mail Order Offered: Whether you can get your drugs in the mail.

For more information about Medicare prescription drug coverage, visit www.medicare.gov on the web.

Technical Note: Medicare Advantage, Cost Plans, and Demonstrations Landscapes are large documents (most are in excess of 50 pages). We recommend you print just the county you are specifically interested in viewing. To print a single county:

- Open the state landscape file you wish to view/print
- Select the county you want to print by scrolling to the specific county page
- Choose File>Print
- In the Print Range area, choose Current Page
- Click the **OK** button

	Descri	ption			Cost			Coverage		Convenience
County	Organization Name	Plan Name	Type of Medicare Health Plan	Total Premium (Including Drug Premium)	Drug Premium	Drug Deductible	Offers Variable Copayments (Tiers)	Type of Extra Coverage Offered in the Gap (G=generics; G/B=generics & brands)	Number of Top 100 Drugs on Formulary	Mail Order Offered
Apache	Health Net	Health Net Preferred	Regional PPO	\$41.00	_					
7,540.10	, road to to					4-				
		Health Net Preferred Plus Humana Gold Choice PFFS	Regional PPO	\$57.00	\$15.09	\$0	•		100	•
	Humana Insurance Company	H1804-005	PFFS	\$0.00	\$0.00	\$0	•		99	•
		Humana Gold Choice PFFS H1804-147	PFFS	\$14.51	\$14.51	\$0	•		99	•
		HumanaChoicePPO PPO R5826- 028	Regional PPO	\$16.00	-					
		HumanaChoicePPO PPO R5826- 042	Regional PPO	\$58.00	\$11.15	\$250			99	•
		HumanaChoicePPO PPO R5826- 014	Regional PPO	\$67.00	\$20.47	\$0	•		99	•
	SecureHorizons Direct	SecureHorizons Direct Plan 4	PFFS	\$25.00	-					
		SecureHorizons Direct Premier Plan 200	PFFS	\$85.00	-					
Cochise	Health Net	Health Net Preferred	Regional PPO	\$41.00	-					
		Health Net Preferred Plus	Regional PPO	\$57.00	\$15.09	\$0	•		100	•
	Humana Insurance Company	Humana Gold Choice PFFS H1804-005	PFFS	\$0.00	\$0.00	\$0	•		99	•
		HumanaChoicePPO PPO R5826- 028	Regional PPO	\$16.00	-					
		HumanaChoicePPO PPO R5826- 042	Regional PPO	\$58.00	\$11.15	\$250			99	•
		HumanaChoicePPO PPO R5826- 014	Regional PPO	\$67.00	\$20.47	\$0	•		99	•
	SecureHorizons Direct	SecureHorizons Direct Plan 2	PFFS	\$0.00	-					
		SecureHorizons Direct Premier Plan 200	PFFS	\$85.00	-					
	Sterling Option I	Sterling Option I	PFFS	\$9.00	-					
	Today's Option	Today's Options Basic	PFFS	\$14.95	-					
		Today's Options Premier	PFFS	\$26.95	-					
	UnitedHealthcare Of Arizona Inc	UnitedHealthcare Medicare Complete Rx	Local HMO	\$0.00	\$0.00	\$0	•		100	•
		UnitedHealthcare Medicare Complete	Local HMO	\$0.00	-					
Coconino	Desert Canyon Community Care	Desert Canyon Community Care - Plus	Local HMO	\$0.00	\$0.00	\$0	•	G	98	•
		Desert Canyon Community Care - Basic	Local HMO	\$0.00	-					

	Desc	cription			Cost			Coverage		Convenience
County	Organization Name	Plan Name	Type of Medicare Health Plan	Total Premium (Including Drug Premium)	Drug Premium	Drug Deductible	Offers Variable Copayments (Tiers)	Type of Extra Coverage Offered in the Gap (G=generics; G/B=generics & brands)	Number of Top 100 Drugs on Formulary	Mail Order Offered
County	Organization name	Desert Canyon Community Care -		,				Í	•	
		Advantage	Local HMO	\$38.00	\$24.62	\$0	•	G	98	•
	Health Net	Health Net Preferred	Regional PPO	\$41.00	-					
		Health Net Preferred Plus	Regional PPO	\$57.00	\$15.09	\$0	•		100	•
	Humana Insurance Company	Humana Gold Choice PFFS H1804-005	PFFS	\$0.00	\$0.00	\$0	•		99	•
		HumanaChoicePPO PPO R5826- 028 HumanaChoicePPO PPO R5826-	Regional PPO	\$16.00	-					
		042	Regional PPO	\$58.00	\$11.15	\$250			99	•
		HumanaChoicePPO PPO R5826- 014	Regional PPO	\$67.00	\$20.47	\$0	•		99	•
	Sterling Option I	Sterling Option I	PFFS	\$9.00	-					
Gila	Health Net	Health Net Preferred	Regional PPO	\$41.00	-					
		Health Net Preferred Plus	Regional PPO	\$57.00	\$15.09	\$0	•		100	•
	Humana Insurance Company	Humana Gold Choice PFFS H1804-005 HumanaChoicePPO PPO R5826-	PFFS	\$0.00	\$0.00	\$0	•		99	•
		028	Regional PPO	\$16.00	-					
		HumanaChoicePPO PPO R5826- 042	Regional PPO	\$58.00	\$11.15	\$250			99	•
		HumanaChoicePPO PPO R5826- 014	Regional PPO	\$67.00	\$20.47	\$0	•		99	•
	Sterling Option I	Sterling Option I	PFFS	\$9.00	-					
Graham	Health Net	Health Net Preferred	Regional PPO	\$41.00	-					
		Health Net Preferred Plus Humana Gold Choice PFFS	Regional PPO	\$57.00	\$15.09	\$0	•		100	•
	Humana Insurance Company	H1804-005	PFFS	\$0.00	\$0.00	\$0	•		99	•
		HumanaChoicePPO PPO R5826- 028	Regional PPO	\$16.00	-					
		HumanaChoicePPO PPO R5826- 042	Regional PPO	\$58.00	\$11.15	\$250			99	•
		HumanaChoicePPO PPO R5826- 014	Regional PPO	\$67.00	\$20.47	\$0	•		99	•
	SecureHorizons Direct	SecureHorizons Direct Plan 1	PFFS	\$0.00	-					
		SecureHorizons Direct Premier Plan 200	PFFS	\$85.00	-					
	Today's Option	Today's Options Basic	PFFS	\$14.95	-					

	Descri	ption			Cost			Coverage		Convenience
County	Organization Name	Plan Name	Type of Medicare Health Plan	Total Premium (Including Drug Premium)	Drug Premium	Drug Deductible	Offers Variable Copayments (Tiers)	Type of Extra Coverage Offered in the Gap (G=generics; G/B=generics & brands)	Number of Top 100 Drugs on Formulary	Mail Order Offered
				,			(**************************************	aramac,	,	011010
		Today's Options Premier UnitedHealthcare Medicare	PFFS	\$26.95	-					
	UnitedHealthcare Of Arizona Inc	Complete Rx	Local HMO	\$0.00	\$0.00	\$0	•		100	•
		UnitedHealthcare Medicare			,	* -				
		Complete	Local HMO	\$0.00	-					
Greenlee	Health Net	Health Net Preferred	Regional PPO	\$41.00	-					
		Health Net Preferred Plus	Regional PPO	\$57.00	\$15.09	\$0	•		100	•
		Humana Gold Choice PFFS				,				
	Humana Insurance Company	H1804-005 HumanaChoicePPO PPO R5826-	PFFS	\$0.00	\$0.00	\$0	•		99	•
		028	Regional PPO	\$16.00	-					
		HumanaChoicePPO PPO R5826-								
		042 HumanaChoicePPO PPO R5826-	Regional PPO	\$58.00	\$11.15	\$250			99	•
		014	Regional PPO	\$67.00	\$20.47	\$0	•		99	•
				401100	4 = 0 111	4.0				
	SecureHorizons Direct	SecureHorizons Direct Plan 4	PFFS	\$25.00	-					
		SecureHorizons Direct Premier Plan 200	PFFS	\$85.00	-					
La Paz	Health Net	Health Net Preferred	Regional PPO	\$41.00	-					
		Health Net Preferred Plus	Regional PPO	\$57.00	\$15.09	\$0	•		100	•
		HumanaChoicePPO PPO R5826-	r togronar r c	ψοιισσ	ψ.σ.σσ	Ψ0				
	Humana Insurance Company	028	Regional PPO	\$16.00	-					
		Humana Gold Choice PFFS H1804-011	PFFS	\$45.00	\$18.80	\$0	•		99	•
		HumanaChoicePPO PPO R5826-	1110	Ψ-0.00	Ψ10.00	ΨΟ	-			
		042	Regional PPO	\$58.00	\$11.15	\$250			99	•
		HumanaChoicePPO PPO R5826- 014	Regional PPO	\$67.00	\$20.47	\$0	•		99	•
			rtogionai i i O	ψ07.00	Ψ20.71	ΨΟ	_			,
	Sterling Option I	Sterling Option I	PFFS	\$9.00	-					
Maricopa	Abrazo Advantage Health Plan	Abrazo Advantage Aetna Golden Medicare Premier	Local HMO	\$28.83	\$28.83	\$250	•		83	
	Aetna Medicare	Plan	Local HMO	\$0.00	\$0.00	\$0	•	G	100	•
				Ψ0.00			-	,		
		Aetna Golden Choice Value Plan Aetna Golden Choice Standard	Local PPO	\$35.00	\$27.42	\$250	•		86	•
		Plan	Local PPO	\$45.00	\$37.10	\$0	•	G	86	•
		Aetna Golden Choice Premier		ψ10.00	ψ07.10	ΨΟ		J		,
		Plan	Local PPO	\$65.00	\$52.20	\$0	•	G	100	•
	CIGNA HealthCare for Seniors	CIGNA HealthCare for Seniors- Platinum Plan	Local HMO	\$0.00	\$0.00	\$0	•	G	99	•

	Descri	ption			Cost			Coverage		Convenience
County	Organization Name	Plan Name	Type of Medicare Health Plan	Total Premium (Including Drug Premium)	Drug Premium	Drug Deductible	Offers Variable Copayments (Tiers)	Type of Extra Coverage Offered in the Gap (G=generics; G/B=generics & brands)	Number of Top 100 Drugs on Formulary	Mail Order Offered
	Health Net	Health Net Preferred	Regional PPO	\$41.00	_			·		
	Trould Pro-	Health Net Preferred Plus	Regional PPO	\$57.00	\$15.09	\$0	•		100	•
	Health Net of Arizona, Inc.	Health Net SeniorCare Complete	Local HMO	\$0.00	\$0.00	\$0	•		100	•
		Health Net SeniorCare	Local HMO	\$0.00	\$0.00	\$0	•		100	•
		Health Net Essential Gold	Local HMO	\$0.00	-					
		Health Net Essential	Local HMO	\$0.00	-					
		Health Net SeniorCare Complete (B-Only)	Local HMO	\$343.99	\$15.09	\$0	•		100	•
	Humana Health Plan, Inc.	Humana Gold Plus HMO H0307- 008	Local HMO	\$0.00	\$0.00	\$0	•	G	99	•
	Humana Insurance Company	Humana Gold Choice PFFS H1804-005	PFFS	\$0.00	\$0.00	\$0	•		99	•
		Humana Gold Choice PFFS H1804-147	PFFS	\$14.51	\$14.51	\$0	•		99	•
		HumanaChoicePPO PPO R5826- 028	Regional PPO	\$16.00	-					
		HumanaChoicePPO PPO H0317- 001	Local PPO	\$47.00	\$27.34	\$0	•	G	99	•
		HumanaChoicePPO PPO R5826- 042	Regional PPO	\$58.00	\$11.15	\$250			99	•
		HumanaChoicePPO PPO R5826- 014	Regional PPO	\$67.00	\$20.47	\$0	•		99	•
		Sun Health MediSun CareOptions	PFFS	\$45.00	-					
	Secure Horizons Medicare Advantage Plan	Secure Horizons Classic Plan	Local HMO	\$0.00	\$0.00	\$0	•		82	•
		Secure Horizons Classic Enhanced Plan	Local HMO	\$53.00	\$23.00	\$0	•	G	82	•
	SecureHorizons Direct	SecureHorizons Direct Plan 4	PFFS	\$25.00	-					
		SecureHorizons Direct Premier Plan 200	PFFS	\$85.00	-					
	Sierra Spectrum	Sierra Spectrum	Local PPO	\$39.00	\$28.64	\$0	•		78	•
	Sterling Option I	Sterling Option I	PFFS	\$9.00	-					
	Sun Health MediSunONE	Sun Health MediSunONE	Local HMO	\$0.00	\$0.00	\$0	•		86	•
	Today's Option	Today's Options Basic	PFFS	\$14.95	-					
		Today's Options Premier	PFFS	\$26.95	-					

	Descri	ption			Cost			Coverage		Convenience
County	Organization Name	Plan Name	Type of Medicare Health Plan	Total Premium (Including Drug Premium)	Drug Premium	Drug Deductible	Offers Variable Copayments (Tiers)	Type of Extra Coverage Offered in the Gap (G=generics; G/B=generics & brands)	Number of Top 100 Drugs on Formulary	Mail Order Offered
County	United HealthCare Insurance	rian Name	Health Flan	r remium)	rieiliulii	Deductible	(Tiels)	biailus)	1 Officially	Offered
	Company	Evercare Plan CP No Rx	Local PPO	\$0.00	-					
		Evercare Plan CP	Local PPO	\$27.00	\$27.00	\$0	•		100	•
	D 10 0 11 0	Desert Canyon Community Care -		00.00	# 0.00	40			00	
Mohave	Desert Canyon Community Care	Plus Desert Canyon Community Care -	Local HMO	\$0.00	\$0.00	\$0	•	G	98	•
		Basic	Local HMO	\$0.00	-					
		Desert Canyon Community Care - Advantage	Local HMO	\$38.00	\$24.62	\$0	•	G	98	•
	Health Net	Health Net Preferred	Regional PPO	\$41.00	-					
		Health Net Preferred Plus	Regional PPO	\$57.00	\$15.09	\$0	•		100	•
		HumanaChoicePPO PPO R5826-				, -				
	Humana Insurance Company	028 Humana Gold Choice PFFS	Regional PPO	\$16.00	-					
		H1804-011	PFFS	\$45.00	\$18.80	\$0	•		99	•
		HumanaChoicePPO PPO R5826- 042	Regional PPO	\$58.00	\$11.15	\$250			99	•
		HumanaChoicePPO PPO R5826- 014	Regional PPO	\$67.00	\$20.47	\$0	•		99	•
	SecureHorizons Direct	SecureHorizons Direct Plan 4	PFFS	\$25.00	-					
		SecureHorizons Direct Premier Plan 100	PFFS	\$95.00	-					
	Sierra Spectrum	Sierra Spectrum	Local PPO	\$39.00	\$28.64	\$0	•		78	•
Navajo	Health Net	Health Net Preferred	Regional PPO	\$41.00	-					
		Health Net Preferred Plus Humana Gold Choice PFFS	Regional PPO	\$57.00	\$15.09	\$0	•		100	•
	Humana Insurance Company	H1804-005	PFFS	\$0.00	\$0.00	\$0	•		99	•
		HumanaChoicePPO PPO R5826- 028	Regional PPO	\$16.00	•					
		HumanaChoicePPO PPO R5826- 042	Regional PPO	\$58.00	\$11.15	\$250			99	•
		HumanaChoicePPO PPO R5826- 014	Regional PPO	\$67.00	\$20.47	\$0	•		99	•
Pima	Health Net	Health Net Preferred	Regional PPO	\$41.00	-					
		Health Net Preferred Plus	Regional PPO	\$57.00	\$15.09	\$0	•		100	•
	Health Net of Arizona, Inc.	Health Net SeniorCare Complete	Local HMO	\$0.00	\$0.00	\$0	•		100	•
		Health Net SeniorCare	Local HMO	\$0.00	\$0.00	\$0	•		100	•

	Descri	ption			Cost			Coverage		Convenience
County	Organization Name	Plan Name	Type of Medicare Health Plan	Total Premium (Including Drug Premium)	Drug Premium	Drug Deductible	Offers Variable Copayments (Tiers)	Type of Extra Coverage Offered in the Gap (G=generics; G/B=generics & brands)	Number of Top 100 Drugs on Formulary	Mail Order Offered
		Health Net Essential	Local HMO	\$0.00	_		, ,			
	+	Health Net Essential Gold Health Net SeniorCare Complete	Local HMO	\$0.00	-					
		(B-Only)	Local HMO	\$343.99	\$15.09	\$0	•		100	•
	Humana Insurance Company	Humana Gold Choice PFFS H1804-005	PFFS	\$0.00	\$0.00	\$0	•		99	•
		Humana Gold Choice PFFS H1804-147	PFFS	\$14.51	\$14.51	\$0	•		99	•
		HumanaChoicePPO PPO R5826- 028	Regional PPO	\$16.00	-					
		HumanaChoicePPO PPO R5826- 042	Regional PPO	\$58.00	\$11.15	\$250			99	•
		HumanaChoicePPO PPO R5826- 014	Regional PPO	\$67.00	\$20.47	\$0	•		99	•
	Secure Horizons Medicare Advantage Plan	Secure Horizons Classic Plan	Local HMO	\$0.00	\$0.00	\$0	•		82	•
		Secure Horizons Classic Enhanced Plan	Local HMO	\$50.00	\$23.00	\$0	•	G	82	•
	SecureHorizons Direct	SecureHorizons Direct Plan 1	PFFS	\$0.00	-					
		SecureHorizons Direct Premier Plan 200	PFFS	\$85.00	-					
	Sierra Spectrum	Sierra Spectrum	Local PPO	\$39.00	\$28.64	\$0	•		78	•
	Sterling Option I	Sterling Option I	PFFS	\$9.00	-					
	Today's Option	Today's Options Basic	PFFS	\$14.95	-					
		Today's Options Premier UnitedHealthcare Medicare	PFFS	\$26.95	-					
	UnitedHealthcare Of Arizona Inc	Complete Rx	Local HMO	\$0.00	\$0.00	\$0	•		100	•
		UnitedHealthcare Medicare Complete	Local HMO	\$0.00	-					
		UnitedHealthcare Medicare Comp Prem Refund	Local HMO	\$0.00	-					
Pinal	Aetna Medicare	Aetna Golden Medicare Value Plan	Local HMO	\$100.00	\$27.42	\$250	•		86	•
		Aetna Golden Choice Value Plan	Local PPO	\$150.00	\$27.42	\$250	•		86	•
	CIGNA HealthCare for Seniors	CIGNA HealthCare for Seniors- Platinum Plan	Local HMO	\$0.00	\$0.00	\$0	•	G	99	•
	Health Net	Health Net Preferred	Regional PPO	\$41.00	-					
		Health Net Preferred Plus	Regional PPO	\$57.00	\$15.09	\$0	•		100	•

	Desc	ription			Cost			Coverage		Convenience
County	Organization Name	Plan Name	Type of Medicare Health Plan	Total Premium (Including Drug Premium)	Drug Premium	Drug Deductible	Offers Variable Copayments (Tiers)	Type of Extra Coverage Offered in the Gap (G=generics; G/B=generics & brands)	Number of Top 100 Drugs on Formulary	Mail Order Offered
	Health Net of Arizona, Inc.	Health Net SeniorCare	Local HMO	\$0.00	\$0.00	\$0	•		100	•
		Health Net SeniorCare Complete	Local HMO	\$0.00	\$0.00	\$0	•		100	•
		Health Net Essential	Local HMO	\$0.00	-					
		Health Net Essential Gold	Local HMO	\$0.00	-					
	Humana Health Plan, Inc.	Humana Gold Plus HMO H0307- 008	Local HMO	\$0.00	\$0.00	\$0	•	G	99	•
	Humana Insurance Company	Humana Gold Choice PFFS H1804-005	PFFS	\$0.00	\$0.00	\$0	•		99	•
		Humana Gold Choice PFFS H1804-147	PFFS	\$14.51	\$14.51	\$0	•		99	•
		HumanaChoicePPO PPO R5826- 028	Regional PPO	\$16.00	-					
		HumanaChoicePPO PPO R5826- 042	Regional PPO	\$58.00	\$11.15	\$250			99	•
		HumanaChoicePPO PPO R5826- 014	Regional PPO	\$67.00	\$20.47	\$0	•		99	•
	Secure Horizons Medicare Advantage Plan	Secure Horizons Classic Plan	Local HMO	\$0.00	\$0.00	\$0	•		82	•
		Secure Horizons Classic Enhanced Plan	Local HMO	\$49.00	\$23.00	\$0	•	G	82	•
	SecureHorizons Direct	SecureHorizons Direct Plan 4	PFFS	\$25.00	•					
		SecureHorizons Direct Premier Plan 200	PFFS	\$85.00	ı					
	Sterling Option I	Sterling Option I	PFFS	\$9.00	1					
Pinal (Partial)	Health Net	Health Net Preferred	Regional PPO	\$41.00	1					
		Health Net Preferred Plus	Regional PPO	\$57.00	\$15.09	\$0	•		100	•
	Humana Insurance Company	HumanaChoicePPO PPO R5826- 028	Regional PPO	\$16.00	-					
		HumanaChoicePPO PPO R5826- 042	Regional PPO	\$58.00	\$11.15	\$250			99	•
		HumanaChoicePPO PPO R5826- 014	Regional PPO	\$67.00	\$20.47	\$0	•		99	•
	Secure Horizons Medicare Advantage Plan	Secure Horizons Classic Plan	Local HMO	\$0.00	\$0.00	\$0	•		82	•
		Secure Horizons Classic Enhanced Plan	Local HMO	\$53.00	\$23.00	\$0	•	G	82	•
Santa Cruz	Health Net	Health Net Preferred	Regional PPO	\$41.00	-					
		Health Net Preferred Plus	Regional PPO	\$57.00	\$15.09	\$0	•		100	•

	Descri	ption			Cost			Coverage		Convenience	
County	Organization Name	Plan Name	Type of Medicare Health Plan	Total Premium (Including Drug Premium)	Drug Premium	Drug Deductible	Offers Variable Copayments (Tiers)	Type of Extra Coverage Offered in the Gap (G=generics; G/B=generics & brands)	Number of Top 100 Drugs on Formulary	Mail Order Offered	
	Health Net of Arizona, Inc.	Health Net SeniorCare	Local HMO	\$0.00	\$0.00	\$0	•		100	•	
		Health Net SeniorCare Complete	Local HMO	\$0.00	\$0.00	\$0	•		100	•	
		Health Net Essential	Local HMO	\$0.00	1						
		Health Net Essential Gold	Local HMO	\$0.00	-						
		Health Net SeniorCare Complete (B-Only)	Local HMO	\$343.99	\$15.09	\$0	•		100	•	
	Humana Insurance Company	Humana Gold Choice PFFS H1804-005	PFFS	\$0.00	\$0.00	\$0	•		99	•	
		HumanaChoicePPO PPO R5826- 028	Regional PPO	\$16.00	-						
		HumanaChoicePPO PPO R5826- 042	Regional PPO	\$58.00	\$11.15	\$250			99	•	
		HumanaChoicePPO PPO R5826- 014	Regional PPO	\$67.00	\$20.47	\$0	•		99	•	
	SecureHorizons Direct	SecureHorizons Direct Plan 1	PFFS	\$0.00	-						
		SecureHorizons Direct Premier Plan 200	PFFS	\$85.00							
	Sterling Option I	Sterling Option I	PFFS	\$9.00	-						
	Today's Option	Today's Options Basic	PFFS	\$14.95	-						
		Today's Options Premier UnitedHealthcare Medicare	PFFS	\$26.95	-						
	UnitedHealthcare Of Arizona Inc	Complete Rx	Local HMO	\$0.00	\$0.00	\$0	•		100	•	
		UnitedHealthcare Medicare Complete	Local HMO	\$0.00	-						
Yavapai	Desert Canyon Community Care	Desert Canyon Community Care - Plus	Local HMO	\$0.00	\$0.00	\$0	•	G	98	•	
		Desert Canyon Community Care - Basic	Local HMO	\$0.00	ı						
		Desert Canyon Community Care - Advantage	Local HMO	\$38.00	\$24.62	\$0	•	G	98	•	
	Health Net	Health Net Preferred	Regional PPO	\$41.00	-						
		Health Net Preferred Plus	Regional PPO	\$57.00	\$15.09	\$0	•		100	•	
	Humana Insurance Company	Humana Gold Choice PFFS H1804-005	PFFS	\$0.00	\$0.00	\$0	•		99	•	
		HumanaChoicePPO PPO R5826- 028	Regional PPO	\$16.00	1						
		HumanaChoicePPO PPO R5826- 042	Regional PPO	\$58.00	\$11.15	\$250			99	•	

	Desc	ription			Cost			Coverage		Convenience
County	Organization Name	Plan Name	Type of Medicare Health Plan	Total Premium (Including Drug Premium)	Drug Premium	Drug Deductible	Offers Variable Copayments (Tiers)	Type of Extra Coverage Offered in the Gap (G=generics; G/B=generics & brands)	Number of Top 100 Drugs on Formulary	Mail Order Offered
		HumanaChoicePPO PPO R5826- 014	Regional PPO	\$67.00	\$20.47	\$0	•		99	•
	SecureHorizons Direct	SecureHorizons Direct Plan 2	PFFS	\$0.00	-	**				
		SecureHorizons Direct Premier Plan 200	PFFS	\$85.00	-					
	Today's Option	Today's Options Basic	PFFS	\$14.95	-					
		Today's Options Premier	PFFS	\$26.95	-					
Yuma	Health Net	Health Net Preferred	Regional PPO	\$41.00	-					
		Health Net Preferred Plus	Regional PPO	\$57.00	\$15.09	\$0	•		100	•
	Humana Insurance Company	HumanaChoicePPO PPO R5826- 028	Regional PPO	\$16.00	-					
		Humana Gold Choice PFFS H1804-011	PFFS	\$45.00	\$18.80	\$0	•		99	•
		HumanaChoicePPO PPO R5826- 042	Regional PPO	\$58.00	\$11.15	\$250			99	•
		HumanaChoicePPO PPO R5826- 014	Regional PPO	\$67.00	\$20.47	\$0	•		99	•
	Sterling Option I	Sterling Option I	PFFS	\$9.00	-					